

Date application rec'd _____
 Application approved _____
 Application not apprv _____
 Fee Paid _____

 Action taken _____

 Signature/Date _____

**Virginia Contracting Officer
 Application for Recertification
 Cost \$50.00**

BIOGRAPHICAL INFORMATION

PLEASE TYPE

The application should be mailed to:
 VIP, Div Purchases & Supply,
 PO Box 1199, Richmond, VA 23218-1199
 or FAX to 804-371-8937

Is current certificate issued in a different name? Yes____ No____		
If yes, Name		
Last name	First	Middle
Title		
Agency		
Department/Div		
Address		
City	State	Zip
Phone ()		Fax ()
Email		
Certificate original issue date	Mo	Day Yr
Certificate expiration date	Mo	Day Yr

List the activities that qualify you for recertification and attach documentation.

Title/Description	Sponsor	Hrs	Points

Minimum 6 points/36 hours every 5 years. A one day seminar (6-8 hours) equals 1 point.

Your points/hours total for this recertification period: _____

I am submitting the enclosed documentation for recertification for the Virginia Contracting Officer program. The information meets the guidelines for acceptable documentation according to the eligibility criteria.

Signature

Date

Upon approval of your application, contact Davina Ellis 804-692-0747 to make payment by check or pay online at dps.dgs.virginia.gov/training/vip.htm